

Special Events Security Plan

#2

Event Name	Date(s)	
Safety Contact Person Name _____ Cellphone _____ Email _____		
Describe your Security Personnel. Attach additional sheets if necessary.		
1. Staff: Contracted licensed security agents? Off-duty police officers? Employees or volunteers?		
2. Duties:		
3. Philosophy: Respectful enforcement? Escorting away from the premises? Working in teams?		
4. How will you address disorderly guests? Illegal behaviors? Excessive noise?		
5. Do you have reporting procedures for incidents? Both minor and serious?		
6. What type of training is provided for employees/volunteers? <input type="checkbox"/> N/A – no employees or volunteers		
7. Describe uniform/logo shirt for employees/volunteers. <input type="checkbox"/> N/A – no employees or volunteers		
<input type="checkbox"/> Employees/ Volunteers How Many _____	<input type="checkbox"/> Contract Security Personnel How Many _____ Contact Person _____ Telephone Number _____ Security Company _____	<input type="checkbox"/> Off Duty Minneapolis Police How Many _____ Contact Person _____ Telephone Number _____
Additional information is available on our website: Event Security Requirements		

Emergency Procedures

First aid on site? Yes No

Police on site? Yes No

Medical personnel on site? Yes No If yes, describe.

Evacuation Procedures

Crowd Management Plan

Internal Communication Plan for your staff and volunteers during the event

Reviewed by

Date

Approved Returned for Additional Information

Comments